

*Please let us know if your family needs
help this holiday season.*

Return this form in a sealed envelope addressed to
Mr. DeVold or Mrs. Gibbons as soon as possible, no
later than November 22nd.

Names of families are kept confidential.

Family Name: _____

Phone: _____

No. of adults in household: _____

Please list the following information for each child in the household 6th grade and younger, including preschoolers. Their wish lists may be needs or wants and may be toys, clothing, etc. If clothing is on the list, please be sure to include sizes.

Child #1 Age _____ Male or Female (circle)
Three things on their wish list- don't forget clothing sizes!

1. _____
2. _____
3. _____

Child #2 Age _____ Male or Female (circle)
Three things on their wish list- don't forget clothing sizes!

1. _____
2. _____
3. _____

Child #3 Age _____ Male or Female (circle)
Three things on their wish list- don't forget clothing sizes!

1. _____
2. _____
3. _____

(please include additional children on a piece of paper.)

While we would like nothing better than to fulfill all three of each child's wishes, fund limitations may not allow us to do so; however, we will be able to provide at least one gift for each child.

